

- ① A request to make payments on a small claims judgment was filed by the judgment debtor (*name of the person who owes money in this case*):

**The court orders:**

- ② ☐ **The Request to Make Payments is denied.** The person in ① must pay the entire judgment immediately.
- ③ ☐ **The Request to Make Payments is approved, and the court orders:**
- a. ☐ Payments of \$ \_\_\_\_\_, on the \_\_\_\_\_ day of each (*month, week, other*): \_\_\_\_\_ starting (*date*): \_\_\_\_\_ until (*date of final payment*): \_\_\_\_\_, amount of final payment: \$ \_\_\_\_\_
- b. ☐ Other payment schedule (*specify*): \_\_\_\_\_
- c. ☐ The total amount of payments is \$ \_\_\_\_\_ which includes interest on the unpaid balance of the judgment. The actual amount of that interest may change if the payments are made late or early.
- d. ☐ The total amount of payments is the same as the judgment. If all payments are made in full and on time, no interest will be owed on the judgment, and the judgment will be paid in full.
- e. If any payment is not made in full and on time, the judgment creditor may notify the court to cancel the payment plan and the entire unpaid balance will become due and collectible.
- f. ☐ Other (*specify*): \_\_\_\_\_

Fill in the court name and street address:

Superior Court of California, County of \_\_\_\_\_

Fill in your case number and case name:

Case Number: \_\_\_\_\_

Case Name: \_\_\_\_\_

- ④ ☐ **The court will make orders on this Request after a hearing, which will take place on:**

**Hearing  
Date**

Time: \_\_\_\_\_ Dept. < \_\_\_\_\_

Name and address of court if different than address above:



**Request for Accommodations** Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least five days before the hearing. Contact the clerk's office for *Request for Accommodations by Persons With Disabilities and Response* (Form MC-410). (Civil Code, § 54.8)

- ⑤ ☐ **Other orders** (*specify*): \_\_\_\_\_

☐ Continued on Attachment 5.

Date: \_\_\_\_\_

Judicial officer \_\_\_\_\_



**Need help?**

For free help, contact your county's small claims advisor:

[local info here]

Or go to "County-Specific Court Information" at [www.courtinfo.ca.gov/selfhelp/smallclaims](http://www.courtinfo.ca.gov/selfhelp/smallclaims)